



PTO/SB/51S (09-04)

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**SUPPLEMENTAL DECLARATION  
FOR REISSUE  
PATENT APPLICATION  
TO CORRECT "ERRORS" STATEMENT  
(37 CFR 1.175)**

Attorney Docket Number 10767-003001

First Named Inventor Michel Lesimple

**COMPLETE if known**

Application Number 09/648,588

Filing Date 08/25/2000

Art Unit 1723

Examiner Name Cooley, Charles E.

I/We hereby declare that:

Every error in the patent which was corrected in the present reissue application, and which is not covered by the prior oath(s) and/or declaration(s) submitted in this application, arose without any deceptive intention on the part of the applicant.

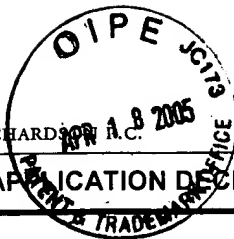
I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>Name of Sole or First Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michel		Lesimple	
Inventor's Signature		Date	16 Fevrier 2005
<b>Name of Second Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
<b>Name of Third Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
<b>Name of Fourth Inventor:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	

☐ Additional inventors or legal representatives(s) are being named on the \_\_\_\_\_ supplemental sheets PTO/SB/02A or 02LR attached hereto.

This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



## REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)  
10767-003001

I hereby declare that:

Each Inventor's residence, mailing address and citizenship are stated below next to their name.

I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in the patent number 5,800,057, granted September 1, 1998 and for which a reissue patent is sought on the invention entitled Driving Head For Stirrer Cans

The specification of which

☐ is attached hereto.

☒ was filed on August 25, 2000 as reissue application number 09/648,588 and was amended on January 27, 2003 (if applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

☒ I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

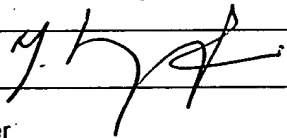
☒ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of others errors.

At least one error upon which is reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

The patent claims less than I had a right to claim, in that the specification of the issued patent discloses an invention that is broader than what is claimed. One error relied upon as the basis of this reissue application was that of originally filing claims directed to subject matter that was narrower than I had a right claim. Claims 1, 11 and 12 are the independent claims in the patent. Claim 1 recites a driving head for a stirring can, the stirrer can comprising a rotatable plate having upwardly projecting fingers. Claim 11 recites a can with a spring. Claim 12 recites a cabinet for stirrer cans, the cabinet comprising a plurality of hollow shelves. The specification, on the other hand, more broadly describes the invention of systems for stirring paint and paint stirring heads including a downwardly extending inference arm that prevents rotation of a paint can by interfering with or engaging its cover. This error and any and all other errors being corrected in the reissue application as of the filing date of this declaration, including all errors that were not covered by the prior declarations submitted in the application, arose without deceptive intention on the part of the applicant.

(REISSUE APPLICATION DECLARATION BY THE INVENTOR page 2)		Docket Number (Optional) 10767-003001	
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. Note: To appoint a power of attorney, use form PTO/SB/81.  Correspondence Address: Direct all communications about application to:			
<input checked="" type="checkbox"/> Customer Number		<div style="border: 1px solid black; padding: 2px;">26161</div>	
<b>OR</b>			
<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.			
Full name of sole or first inventor (given name, family name) Michel Lesimple			
Inventor's Signature 		Date 16 Février 2005	
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Full name of second joint inventor (given name, family name)			
Inventor's Signature		Date	
Residence		Citizenship	
Mailing Address			
Full name of third joint inventor (given name, family name)			
Inventor's Signature		Date	
Residence		Citizenship	
Mailing Address			

☐ Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02LR attached hereto.